



OFFICE OF CHIEF MEDICAL EXAMINER
CITY OF NEW YORK



REPORT OF AUTOPSY

Name of Decedent: Valerie Denise Young

M.E. Case #: K05-03154

Autopsy Performed by: Frede I. Frederic, M.D.

Date of Autopsy: June 20, 2005

FINAL DIAGNOSES

- I. PULMONARY EMBOLISM, BILATERAL.
- DEEP VEINS THROMBOSIS OF LOWER EXTREMITIES.
- II. SEIZURE DISORDER, ETIOLOGY UNDETERMINED, BY HISTORY.

OPINION:

CAUSE OF DEATH:

DUE TO:

DUE TO:

PULMONARY EMBOLISM.
DEEP VEINS THROMBOSIS OF LOWER
EXTREMITIES.
INACTIVITY
DUE TO SEIZURE DISORDER
OF UNDETERMINED ETIOLOGY.

MANNER OF DEATH:

NATURAL.

**OFFICE OF CHIEF MEDICAL EXAMINER
CITY OF NEW YORK**

REPORT OF AUTOPSY

CASE NO. K05-03154

*I hereby certify that I, Frede I. Frederic, M.D., City Medical Examiner - I, have performed an autopsy on the body of **Valerie Denise Young**, on the 20th day of June, 2005, commencing at 2:00 PM, in the Brooklyn Mortuary of the Office of Chief Medical Examiner of the City of New York.*

This autopsy was performed in the presence of Dr. Gutierrez.

EXTERNAL EXAMINATION:

The body is that of a well developed, well nourished Black female weighing 150 lb, measuring 67" and appearing to be the stated age of 49 years old. The body is cold and nude. Rigor mortis is well developed and present to an equal extent in all joints. Non-fixed, purple livor mortis is evident over the posterior parts of the body, except in areas exposed to pressure where it is absent. The head and face exhibit no trauma. The head hair is black/gray, of a short length and has a corn row style. The eyes are brown with pink conjunctivae. The corneae and lenses are transparent. The pupils are regular, round, equal, central and measure .4 cm in diameter. The ears and external auditory canals are unremarkable. The skeleton of the nose is intact. The gums are unremarkable. The upper and lower teeth are natural and in a good state of dental repair. Some upper and lower teeth are absent. The neck is symmetrical and unremarkable. The shoulders are symmetrical. The chest is symmetrical and unremarkable. The breasts are symmetrical and unremarkable. The abdomen is slightly convex and no masses can be palpated through the abdominal wall. The back is symmetrical and unremarkable. The external genitalia and the anus are unremarkable. The extremities are symmetrical and unremarkable. The fingernails are short, clean and unremarkable. The toenails are short, clean and partly painted with nail polish. The skin of the legs exhibits no dystrophic changes. No edema is present in the ankles or legs. No jewelry, rings, or watch is present. Passive motion of the neck, shoulders, elbows, wrists, fingers, hips, knees and ankles fails to elicit any bony crepitus or abnormal motion.

There is no evidence of recent trauma.

EVIDENCE OF RECENT MEDICAL TREATMENT:

EKG pads are noted on the anterior chest wall. An endotracheal tube is inserted in the oral cavity.

There are no other identifying features.

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INTERNAL EXAMINATION:

BODY CAVITIES: The body is opened by a Y-shaped incision. The muscles of the chest and abdominal wall are normal in color and consistency. The ribs exhibit no fractures. The pleural cavities are smooth and each cavity is dry. The liver and spleen do not extend below the costal margins. The bladder lies below the symphysis pubis. The organs of the pleural and peritoneal cavities are in their usual positions in situ.

NECK: The soft tissues of the neck, thyroid and cricoid cartilages, larynx and hyoid bone show no hemorrhage or evidence of traumatic injury. The larynx is patent and no obstructions are found. The epiglottis and vocal cords are unremarkable.

CARDIOVASCULAR SYSTEM: The heart weighs 400 gm. The pericardium contains a scant amount of clear liquid. The epicardial surface is smooth. The external configuration of the heart is unremarkable. The right and left ventricles are unremarkable. The endocardium and valve leaflets are smooth, transparent and exhibit no thrombi, vegetations or fibrosis. The left papillary muscles are slightly hypertrophic. The trabeculae carneae and remainder of the papillary muscles are unremarkable. The chordae tendineae are usual. The coronary arteries have their usual distribution with a right predominance. The coronary ostia are normal in patency. The coronary arteries are unremarkable. The myocardium is firm, dark brown and homogeneous. The aorta exhibits minimal atherosclerotic changes. The venae cavae are unremarkable.

RESPIRATORY SYSTEM: The right lung weighs 450 gm and the left lung weighs 420 gm. The tracheal mucosa is unremarkable. The pleurae are delicate and glistening. The lungs are distended and are variegated pink/gray to dark purple. The lung parenchyma is of the usual consistency and mottled with a slight amount of anthracotic pigment. No nodularity and no focal or diffuse lesions are seen. The extra and intrapulmonary bronchi are congested. The pulmonary arteries are occluded by a black coiled saddle emboli. The blood clot extends to the small branches of the pulmonary arteries. The pulmonary veins exhibit no pathological change. The hilar and mediastinal lymph nodes are unremarkable.

HEPATOBIILIARY SYSTEM: The liver weighs 2350 gm. The capsule of Glisson is transparent. The external surface is smooth, glistening and reddish brown. The borders are sharp. The parenchyma is firm and brown with the usual lobular architecture and no focal or diffuse lesions. The gallbladder has delicate walls and contains a moderate amount of bile and has a smooth mucosa. No stones are present. The intra and extrahepatic biliary ducts are patent. The hepatic and portal veins and the hepatic artery are unremarkable.

HEMOLYMPHATIC SYSTEM: The spleen weighs 250 gm and is firm. The capsule is glistening and unremarkable. The internal architecture is clearly defined.

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GASTROINTESTINAL SYSTEM: The esophagus is empty and unremarkable. The stomach contains a large amount of partly digested food. The remainder of the gastrointestinal system is unremarkable. The appendix is identified.

UROGENITAL SYSTEM: Each kidney weighs 150 gm. The surfaces are smooth and glistening. The capsules strip easily revealing a red-brown surface. The corticomedullary junction is well defined. The calyceal and collecting systems are not remarkable. The renal arteries and veins are unremarkable. The ureters are not dilated or obstructed. The bladder is empty. The bladder exhibits the usual mucosa and muscularis. The ureteral orifices are patent. The vaginal canal is patent. The cervix is not remarkable. The uterus is not enlarged and is of the usual shape. The endometrial and endocervical cavities are not remarkable. The myometrium is not remarkable. The adnexae are not remarkable.

ENDOCRINE SYSTEM: The adrenals, thyroid, pancreas and pituitary are not remarkable.

MUSCULOSKELETAL SYSTEM: There are no gross bony deformities. The muscles are well developed and of the usual color and consistency. The sternum, ribs and spine exhibit the usual bone density and marrow.

LOWER EXTREMITIES: Posterior dissection of the lower extremities shows deep vein thrombosis.

CENTRAL NERVOUS SYSTEM: The scalp is reflected and the calvarium removed revealing no evidence of trauma. The dura mater does not exhibit any stains or discolorations. The leptomeninges are not remarkable. The brain is fixed in formalin for further study. The skull is intact.

Sample of blood, bile, gastric content, brain, liver and vitreous are submitted for toxicology.

Sample of blood is submitted for serology.

Frede Frederic
Frede I. Frederic, M.D.
City Medical Examiner - I

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DRAFT: 06/22/05:jg
FINAL: 07/26/05:jg
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The City of New York
Office of Chief Medical Examiner
520 First Avenue
New York, NY 10016

Forensic Toxicology Laboratory

Deceased: **Valerie Young**

M.E. Case No.: **K0503154**

Lab. No.: **2726/05**

Autopsy By: **Dr. Frederic**

Autopsy Date: **06/20/05**

Specimens Received:

Blood, Bile, Brain, Gastric Content, Liver, Vitreous Humour

Specimens Received in Laboratory By: **Samantha Rappa**

Date Received: **06/21/05**

Equivalents: 1.0 mcg/mL = 1.0 mg/L = 0.1 mg/dL = 1000 ng/mL

1.0 mcg/g = 1.0 mg/kg = 0.1 mg/100g = 1000 ng/g

Results

Blood

Olanzapine	0.24 mg/L	GC
Olanzapine	Detected	GC/MS
Mirtazapine	<0.1 mg/L	GC
Mirtazapine	Detected	GC/MS
Carbamazepine	9.4 mg/L	LC
Carbamazepine	Detected	GC/MS
Lidocaine	Detected	GC/MS
Iminostilbene	Detected	GC/MS
Formyl-acridine	Detected	GC/MS
Ethanol	Not detected	GC
Opiates	Not detected	EI
Benzoyllecgonine	Not detected	EI
Amphetamines	Not detected	EI
Barbiturates	Not detected	LC
Phenytoin	Not detected	LC

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CT = Color Test

EI = Enzyme Immunoassay

GC = Gas Chromatography

GC/MS = Gas Chromatography/Mass Spectrometry

ISE = Ion Selective Electrode

LC = Liquid Chromatography

RIA = Radio Immunoassay

SP = Spectrophotometry

TLC = Thin Layer Chromatography

< = Less than

Signed:

Marina Stajic
Dr. Marina Stajic

Date: 07/13/05

AW

Rev. 3/25/98

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